

Frequently Asked Questions Client Expenditure Summary Report

The Client Expenditure Summary report is a tool that Local Health Departments and the families we serve can use to identify when a client may be eligible for the Insurance Premium Payment Benefit through CSHCS. The Client Expenditure Summary Report generates the total dollar amounts for the specific claim types throughout a given time period. The specific claim types are as follows: Institutional, Professional, Pharmacy and Manual.

- **Institutional** - Institutional claims represent services provided by hospitals, in both inpatient and outpatient settings.
- **Professional** – Professional claims represent services that include specialists, radiologists, anesthesiologists, ER physicians, etc.
- **Pharmacy** – Pharmacy claims represent services provided by retail/specialty pharmacy providers and clients/families who submit mail order pharmacy co-pays for reimbursement.
- **Manual** - Manual payments occur when a standard claim cannot be processed through the CHAMPS Medicaid payment system. Claims that fall into this category may include transportation reimbursement, mail order DME co-pays Medicare Part D copays, and Insurance Premium Payment benefits.